

**Agency Report of:
Public Official Appointments**

A Public Document


1. Agency Name COUNTY OF SAN BERNARDINO			California Form 806 For Official Use Only
Division, Department, or Region (If Applicable) CLERK OF THE BOARD OF SUPERVISORS			
Designated Agency Contact (Name, Title) LAURA H. WELCH, CLERK OF THE BOARD			
Area Code/Phone Number 909-387-3841	E-mail Lwelch@cob.sbcounty.gov	Page <u>1</u> of <u>3</u>	Date Posted: <u>2/12/13</u> <small>(Month, Day, Year)</small>

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Board of Retirement	▶ Name <u>Rutherford, Janice</u> <small>(Last, First)</small> Alternate, if any <u>N/A</u> <small>(Last, First)</small>	▶ <u>01 / 29 / 13</u> <small>Appt Date</small> ▶ <u>3 years</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
Board of Supervisors, Chair	▶ Name <u>Rutherford, Janice</u> <small>(Last, First)</small> Alternate, if any <u>N/A</u> <small>(Last, First)</small>	▶ <u>01 / 8 / 13</u> <small>Appt Date</small> ▶ <u>2 years</u> <small>Length of Term</small>	▶ Per Meeting: \$ _____ ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input checked="" type="checkbox"/> <u>11,397</u> <small>Other</small>
Inland Empire Health Plan	▶ Name <u>Rutherford, Janice</u> <small>(Last, First)</small> Alternate, if any <u>N/A</u> <small>(Last, First)</small>	▶ <u>01 / 29 / 13</u> <small>Appt Date</small> ▶ <u>Until replaced</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>200</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input checked="" type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
Inland Empire Health Plan	▶ Name <u>Ovitt, Gary C.</u> <small>(Last, First)</small> Alternate, if any <u>N/A</u> <small>(Last, First)</small>	▶ <u>01 / 29 / 13</u> <small>Appt Date</small> ▶ <u>Until replaced</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>200</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input checked="" type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other

3. Verification

I have read and understand FPPC Regulation 18705.5. I have verified that the appointment and information identified above is true to the best of my information and belief.

	<u>Laura H. Welch</u>	<u>Clerk of the Board</u>	<u>2/12/13</u>
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(Month, Day, Year)</small>

Comment: _____

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Continuation Sheet**

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2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Inland Valley Development Agency	▶ Name <u>Ramos, James</u> <small>(Last, First)</small> Alternate, if any <u>Ovitt, Gary</u> <small>(Last, First)</small>	▶ <u>01 / 29 / 13</u> <small>Appt Date</small> ▶ <u>Until replaced</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>Other</u>
Inland Valley Development Agency	▶ Name <u>Gonzales, Josie</u> <small>(Last, First)</small> Alternate, if any <u>N/A</u> <small>(Last, First)</small>	▶ <u>01 / 29 / 13</u> <small>Appt Date</small> ▶ <u>Until replaced</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>Other</u>
Local Agency Formation Commission	▶ Name <u>Lovingood, Robert</u> <small>(Last, First)</small> Alternate, if any <u>Rutherford, Janice</u> <small>(Last, First)</small>	▶ <u>01 / 29 / 13</u> <small>Appt Date</small> ▶ <u>Until replaced</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>200</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input checked="" type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>Other</u>
Local Agency Formation Commission	▶ Name <u>Ramos, James</u> <small>(Last, First)</small> Alternate, if any <u>N/A</u> <small>(Last, First)</small>	▶ <u>01 / 29 / 13</u> <small>Appt Date</small> ▶ <u>Until replaced</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>200</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input checked="" type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>Other</u>
Mojave Desert Mountain Recycling Authority	▶ Name <u>Lovingood, Robert</u> <small>(Last, First)</small> Alternate, if any <u>Ramos, James</u> <small>(Last, First)</small>	▶ <u>01 / 29 / 13</u> <small>Appt Date</small> ▶ <u>Until replaced</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>75</u> ▶ Estimated Annual: <input checked="" type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>Other</u>
San Bernardino International Airport Authority	▶ Name <u>Ramos, James</u> <small>(Last, First)</small> Alternate, if any <u>Gonzales, Josie</u> <small>(Last, First)</small>	▶ <u>01 / 29 / 13</u> <small>Appt Date</small> ▶ <u>Until replaced</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>Other</u>

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2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
South Coast Air Quality Management District	▶ Name <u>Gonzales, Josie</u> <small>(Last, First)</small> Alternate, if any <u>N/A</u> <small>(Last, First)</small>	▶ <u>01 / 29 / 13</u> <small>Appt Date</small> ▶ <u>Until replaced</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>Other</u>
Southern California Associated Governments	▶ Name <u>Ovitt, Gary</u> <small>(Last, First)</small> Alternate, if any <u>N/A</u> <small>(Last, First)</small>	▶ <u>01 / 29 / 13</u> <small>Appt Date</small> ▶ <u>Until replaced</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>170</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input checked="" type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>Other</u>
Victor Valley Economic Development Authority	▶ Name <u>Lovingood, Robert</u> <small>(Last, First)</small> Alternate, if any <u>N/A</u> <small>(Last, First)</small>	▶ <u>01 / 29 / 13</u> <small>Appt Date</small> ▶ <u>Until replaced</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>50</u> ▶ Estimated Annual: <input checked="" type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>Other</u>
	▶ Name _____ <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ ____ / ____ / ____ <small>Appt Date</small> ▶ _____ <small>Length of Term</small>	▶ Per Meeting: \$ _____ ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>Other</u>
	▶ Name _____ <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ ____ / ____ / ____ <small>Appt Date</small> ▶ _____ <small>Length of Term</small>	▶ Per Meeting: \$ _____ ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>Other</u>
	▶ Name _____ <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ ____ / ____ / ____ <small>Appt Date</small> ▶ _____ <small>Length of Term</small>	▶ Per Meeting: \$ _____ ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>Other</u>